

MailMan message for MUSHRUSH, GRACE J MD PSYCHIATRIST

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Subj: Your performance [#34729795] 06 Jul 01 14:54 15 lines

From: MUSHRUSH, GRACE J MD 2 of 2 responses read. In 'IN' basket. Page 1

Dear Raj,

What course are you teaching at MGH? Who gave you permission to be off the premises?

You failed your McLean Rotation and your oral exam.

Your behavior does not endear you to any of the faculty. How do you expect people to respond favorably to you when you announce upon arrival at each rotation that you don't care about clinical psychiatry and that you don't want to be on the rotation in the first place.

I have discussed your performance or lack thereof with the residency training committee and you are hereby placed on probation as you have not heeded our previous warnings about reshaping your behavior your attendance, and your performance.

1) Rajendra Badgaiyan <rajendra@wjh.harvard.edu> Mon, 9 Jul 2001 16:05:33 -0400
70 lines

Subj: Re: Your performance

Dear Dr Mushrush,

I do not want to be paranoid, but I do think that I am being unfairly targetted because of my academic activities. You mention that I failed McLean rotation, even though Dr Villa who observed my work at McLean for full month (taking independent care of dozens of patients) gave me an excellent evaluation. You believe one evaluation by someone who was one of 6 attendings in the CEC and who observed my evaluation of only 3 patients (incidentally, in one case, we had different opinion about the plan and my plan was upheld by the insurance). You have also ignored the fact that in the last 2 years I was evaluated by about 20 attendings and almost all of them gave me a very good evaluation.

May be it is a coincidence, but in the oral examination, I was the only one who was given 15 min instead of 25 to conclude the interview (possibly because of a mistake) and was not given even a minute to organize myself before presenting the case. I am sure, you know, such events are unsettling for a candidate in the examination. On the top of it, I am not sure, if any body else in the oral examination got such a psychotic patient with a lot of circumstantiality and multiple psychiatric problems to evaluate and reach to a definite diagnosis in such a short time. I do not know where I wasted time in the interview, mainly because no faculty as ever conducted a de novo evaluation in limited time to teach us how to conduct an interview in such a restrictive situation.

As for my academic activities goes, first, I do not take classes at MGH and secondly, before I joined the program, I had made it clear that I will continue my academic activities during the training. I have been doing it by ensuring minimal disruption of clinical responsibilities - by going an extra mile. Dr Festin and Dr Chang know that when I had to go to Boston during the day, I always made sure not to neglect my clinical responsibilities and used to drive between Boston and Brockton 4 times a day, (spending 4-6 hours on the road) and used to stay until 9 pm. Also, to compensate, I never took a day off or called in sick in the last 2 years

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Today is the first time I am calling sick, even though I have been mentally and physically unwell on a number of occasions in the past.

I was assured at the time of joining the program and later that I will be asked to do only 'minimum clinical rotations' required for board certification and a few weeks ago you had mentioned that I have to do only CL and emergency psych rotations. When you put me on other rotations, I was surprised but decided to respect your decision. If an attending is not willing to adjust supervision schedule to let me continue my work, I should be the one to complain. In any case, I have difference of opinion with Dr Osseur and I think his approach does not pass scientific scrutiny. I have discussed this issue in didactics and am willing to discuss in any other forum. I do not feel comfortable accepting a concept that I do not think is scientifically appropriate. If I accept this, not only will I not gain anything out of his supervision but will unlearn what I have learned about scientific inquiry in the past several years.

I also do not agree with you that my behavior is not endear to "any of the faculty". There are faculty who admire me and think that I am one of the best.

I do not mean to say that I am doing great and there is no room for improvement. I always strive to get better. Under the circumstances, however, I do not think I am doing too bad.

If you are interested in discussing these issues, I will be happy to talk to you when you have time.

Regards.

Raj

PS: I am sick today and have requested sick leave for today (monday) and tomorrow.

2) MUSHRUSH, GRACE J MD 10 Jul 01 14:41 29 lines

Raj, there are a tremendous number of distortions in what you said above. I never promised that you would only take C/L and emergency psychiatry; you are in the full program for PGY III, however, you still have some months of work from PGY II to make up. The full training is 48 months even if you finish the core requirements in less time.

It is interesting that when you have a female attending or preceptor that you get the worst evaluations. Is there something in the way you relate to female attendings that causes them to see you less favorably? This was clearly the case on W.Rox. med. and also on CEC at McLean. Also you seem to ignore what I tell you about the requirements. You somehow think that you should just be pushed through without your making a commitment to clinical training. You should not be trying to do a complete research agenda as well as a clinical one. Other residents who have been interested in both research and clinical, have done the residency on a part time basis but have extended it over more years, e.g. 6 years to make sure that one is well grounded clinically.

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It seems to me that as a potential psychiatrist you should know not to go into a rotation and tell the preceptor that you don't want to be there and have no interest in clinical issues! If your goal is to establish minimum expectations on the part of the preceptor, that doesn't work in your favor.!

Also, the ACGME core requirements are not the complete ACGME requirements. I have told you several times that you will not get credit for training until you have completed all the ACGME requirements. No matter how much you try to persuade me otherwise, I do not have the authority to give you credit for work you have not done.

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